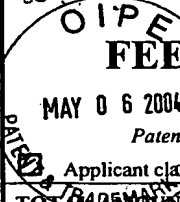
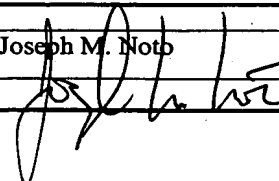
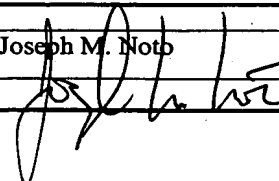
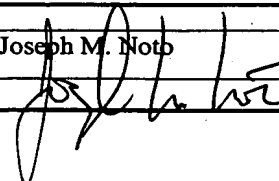


|  |                      |  |  |                    |            |             |                    |                      |       |               |         |          |      |                     |                      |
|--|----------------------|--|--|--------------------|------------|-------------|--------------------|----------------------|-------|---------------|---------|----------|------|---------------------|----------------------|
| <div style="display: flex; align-items: center;"> <div style="text-align: center; margin-right: 10px;">  </div> <div> <h2 style="margin: 0;">FEE TRANSMITTAL</h2> <h3 style="margin: 0;">FOR FY 2004</h3> <p style="font-size: small; margin: 0;">Patent fees are subject to annual revision.</p> <p style="font-size: x-small; margin: 0;">Applicant claims small entity status. See 37 CFR 1.27</p> </div> </div> |                      | <p style="font-size: x-small; margin: 0;">Complete if Known</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 50%;">Application Number</td><td>10/658,953</td></tr> <tr><td>Filing Date</td><td>September 10, 2003</td></tr> <tr><td>First Named Inventor</td><td>Huwig</td></tr> <tr><td>Examiner Name</td><td>Unknown</td></tr> <tr><td>Art Unit</td><td>1614</td></tr> <tr><td>Attorney Docket No.</td><td>20959/2140 (P 63469)</td></tr> </table> |  | Application Number | 10/658,953 | Filing Date | September 10, 2003 | First Named Inventor | Huwig | Examiner Name | Unknown | Art Unit | 1614 | Attorney Docket No. | 20959/2140 (P 63469) |
| Application Number   | 10/658,953           |  |  |                    |            |             |                    |                      |       |               |         |          |      |                     |                      |
| Filing Date  | September 10, 2003   |  |  |                    |            |             |                    |                      |       |               |         |          |      |                     |                      |
| First Named Inventor   | Huwig                |  |  |                    |            |             |                    |                      |       |               |         |          |      |                     |                      |
| Examiner Name  | Unknown              |  |  |                    |            |             |                    |                      |       |               |         |          |      |                     |                      |
| Art Unit   | 1614                 |  |  |                    |            |             |                    |                      |       |               |         |          |      |                     |                      |
| Attorney Docket No.  | 20959/2140 (P 63469) |  |  |                    |            |             |                    |                      |       |               |         |          |      |                     |                      |
| <b>TOTAL AMOUNT OF PAYMENT</b> (\$ 130)  |                      |  |  |                    |            |             |                    |                      |       |               |         |          |      |                     |                      |

| METHOD OF PAYMENT (check all that apply)   | FEE CALCULATION (continued)   |                   |                |  |                 |                 |                |           |   |                  |      |      |        |  |                                     |      |      |      |      |  |                   |     |      |     |                           |      |                  |      |       |  |      |      |                    |      |  |      |        |      |                        |   |  |     |      |              |  |                |     |          |     |   |      |     |      |     |  |      |       |              |     |   |      |       |      |       |  |                    |     |        |     |                  |      |     |      |                    |  |      |     |      |     |                          |      |              |      |              |   |                 |          |          |          |                                  |      |       |      |     |                                    |      |       |      |     |                                   |      |     |      |     |                                       |      |     |      |     |  |      |     |      |     |  |      |    |      |    |                                     |      |     |      |     |   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |
|--|---|-------------------|----------------|--|-----------------|-----------------|----------------|-----------|---|------------------|------|------|--------|--|-------------------------------------|------|------|------|------|--|-------------------|-----|------|-----|---------------------------|------|------------------|------|-------|--|------|------|--------------------|------|--|------|--------|------|------------------------|---|--|-----|------|--------------|--|----------------|-----|----------|-----|---|------|-----|------|-----|--|------|-------|--------------|-----|---|------|-------|------|-------|--|--------------------|-----|--------|-----|------------------|------|-----|------|--------------------|--|------|-----|------|-----|--------------------------|------|--------------|------|--------------|---|-----------------|----------|----------|----------|----------------------------------|------|-------|------|-----|------------------------------------|------|-------|------|-----|-----------------------------------|------|-----|------|-----|---------------------------------------|------|-----|------|-----|--|------|-----|------|-----|--|------|----|------|----|-------------------------------------|------|-----|------|-----|---|------|----|------|----|--|------|-----|------|-----|---|------|-----|------|-----|--|------|-----|------|-----|---|------|-----|------|-----|---|
| <div style="margin-bottom: 10px;"> <input checked="" type="checkbox"/> Check             <input type="checkbox"/> Credit Card             <input type="checkbox"/> Money Order             <input type="checkbox"/> Other             <input type="checkbox"/> None         </div> <div> <input type="checkbox"/> Deposit Account:<br/>           Deposit Account Number: <span style="border: 1px solid black; padding: 2px;">14-1138</span><br/><br/>           Deposit Account Name: <span style="border: 1px solid black; padding: 2px;">Nixon Peabody LLP</span> </div> <p>The Commissioner is authorized to: (check all that apply)</p> <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> Charge fee(s) indicated below           <input checked="" type="checkbox"/> Credit any overpayments.         </div> <input checked="" type="checkbox"/> Charge any additional fee(s)<br><input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account. | <h3>3. ADDITIONAL FEES</h3> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1051</td><td>130</td><td>2051</td><td>65</td><td>Surcharge - late filing fee or oath</td></tr> <tr><td>1052</td><td>50</td><td>2052</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet</td></tr> <tr><td>1053</td><td>130</td><td>1053</td><td>130</td><td>Non-English specification</td></tr> <tr><td>1812</td><td>2,520</td><td>1812</td><td>2,520</td><td>For filing a request for <i>ex parte</i> reexamination</td></tr> <tr><td>1804</td><td>920*</td><td>1804</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td></tr> <tr><td>1805</td><td>1,840*</td><td>1805</td><td>1,840*</td><td>Requesting publication of SIR after Examiner action</td></tr> <tr><td>1251</td><td>110</td><td>2251</td><td>55</td><td>Extension for reply within first month</td></tr> <tr><td>1252</td><td>420</td><td>2252</td><td>210</td><td>Extension for reply within second month</td></tr> <tr><td>1253</td><td>950</td><td>2253</td><td>475</td><td>Extension for reply within third month</td></tr> <tr><td>1254</td><td>1,480</td><td>2254</td><td>740</td><td>Extension for reply within fourth month</td></tr> <tr><td>1255</td><td>2,010</td><td>2255</td><td>1,005</td><td>Extension for reply within fifth month</td></tr> <tr><td>1401</td><td>330</td><td>2401</td><td>165</td><td>Notice of Appeal</td></tr> <tr><td>1402</td><td>330</td><td>2402</td><td>165</td><td>Filing a brief in support of an appeal</td></tr> <tr><td>1403</td><td>290</td><td>2403</td><td>145</td><td>Request for oral hearing</td></tr> <tr><td>1451</td><td>1,510</td><td>1451</td><td>1,510</td><td>Petition to institute a public use proceeding</td></tr> <tr><td>1452</td><td>110</td><td>2452</td><td>55</td><td>Petition to revive - unavoidable</td></tr> <tr><td>1453</td><td>1,330</td><td>2453</td><td>665</td><td>Petition to revive - unintentional</td></tr> <tr><td>1501</td><td>1,330</td><td>2501</td><td>665</td><td>Utility issue fee (or reissue)</td></tr> <tr><td>1502</td><td>480</td><td>2502</td><td>240</td><td>Design issue fee</td></tr> <tr><td>1503</td><td>640</td><td>2503</td><td>320</td><td>Plant issue fee</td></tr> <tr><td>1460</td><td>130</td><td>1460</td><td>130</td><td>Petitions to the Commissioner</td></tr> <tr><td>1807</td><td>50</td><td>1807</td><td>50</td><td>Processing fee under 37 CFR 1.17(q)</td></tr> <tr><td>1806</td><td>180</td><td>1806</td><td>180</td><td>Submission of Information Disclosure Stmt</td></tr> <tr><td>8021</td><td>40</td><td>8021</td><td>40</td><td>Recording each patent assignment per property (times number of properties)</td></tr> <tr><td>1809</td><td>770</td><td>2809</td><td>385</td><td>Filing a submission after final rejection (37 CFR 1.129(a))</td></tr> <tr><td>1810</td><td>770</td><td>2810</td><td>385</td><td>For each additional invention to be examined (37 CFR 1.129(b))</td></tr> <tr><td>1801</td><td>770</td><td>2801</td><td>385</td><td>Request for Continued Examination (RCE)</td></tr> <tr><td>1802</td><td>900</td><td>1802</td><td>900</td><td>Request for expedited examination of a design application</td></tr> </tbody> </table> <div style="margin-top: 10px;">           Other fee (specify) <span style="border: 1px solid black; padding: 2px;">Processing fee for correcting inventorship</span> </div> <div style="text-align: right; margin-top: 10px;"> <b>130</b> </div> | Large Entity      |                | Small Entity   |                 | Fee Description | Fee Code       | Fee (\$)  | Fee Code  | Fee (\$)         | 1051 | 130  | 2051   | 65   | Surcharge - late filing fee or oath | 1052 | 50   | 2052 | 25   | Surcharge - late provisional filing fee or cover sheet | 1053              | 130 | 1053 | 130 | Non-English specification | 1812 | 2,520            | 1812 | 2,520 | For filing a request for <i>ex parte</i> reexamination | 1804 | 920* | 1804               | 920* | Requesting publication of SIR prior to Examiner action | 1805 | 1,840* | 1805 | 1,840*                 | Requesting publication of SIR after Examiner action | 1251   | 110 | 2251 | 55           | Extension for reply within first month | 1252           | 420 | 2252     | 210 | Extension for reply within second month | 1253 | 950 | 2253 | 475 | Extension for reply within third month | 1254 | 1,480 | 2254         | 740 | Extension for reply within fourth month | 1255 | 2,010 | 2255 | 1,005 | Extension for reply within fifth month | 1401               | 330 | 2401   | 165 | Notice of Appeal | 1402 | 330 | 2402 | 165                | Filing a brief in support of an appeal | 1403 | 290 | 2403 | 145 | Request for oral hearing | 1451 | 1,510        | 1451 | 1,510        | Petition to institute a public use proceeding | 1452            | 110      | 2452     | 55       | Petition to revive - unavoidable | 1453 | 1,330 | 2453 | 665 | Petition to revive - unintentional | 1501 | 1,330 | 2501 | 665 | Utility issue fee (or reissue)    | 1502 | 480 | 2502 | 240 | Design issue fee                      | 1503 | 640 | 2503 | 320 | Plant issue fee                                    | 1460 | 130 | 1460 | 130 | Petitions to the Commissioner                              | 1807 | 50 | 1807 | 50 | Processing fee under 37 CFR 1.17(q) | 1806 | 180 | 1806 | 180 | Submission of Information Disclosure Stmt | 8021 | 40 | 8021 | 40 | Recording each patent assignment per property (times number of properties) | 1809 | 770 | 2809 | 385 | Filing a submission after final rejection (37 CFR 1.129(a)) | 1810 | 770 | 2810 | 385 | For each additional invention to be examined (37 CFR 1.129(b)) | 1801 | 770 | 2801 | 385 | Request for Continued Examination (RCE) | 1802 | 900 | 1802 | 900 | Request for expedited examination of a design application |
| Large Entity   |   | Small Entity      |                | Fee Description  |                 |                 |                |           |   |                  |      |      |        |  |                                     |      |      |      |      |  |                   |     |      |     |                           |      |                  |      |       |  |      |      |                    |      |  |      |        |      |                        |   |  |     |      |              |  |                |     |          |     |   |      |     |      |     |  |      |       |              |     |   |      |       |      |       |  |                    |     |        |     |                  |      |     |      |                    |  |      |     |      |     |                          |      |              |      |              |   |                 |          |          |          |                                  |      |       |      |     |                                    |      |       |      |     |                                   |      |     |      |     |                                       |      |     |      |     |  |      |     |      |     |  |      |    |      |    |                                     |      |     |      |     |   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |
| Fee Code   | Fee (\$)  | Fee Code          | Fee (\$)       |  |                 |                 |                |           |   |                  |      |      |        |  |                                     |      |      |      |      |  |                   |     |      |     |                           |      |                  |      |       |  |      |      |                    |      |  |      |        |      |                        |   |  |     |      |              |  |                |     |          |     |   |      |     |      |     |  |      |       |              |     |   |      |       |      |       |  |                    |     |        |     |                  |      |     |      |                    |  |      |     |      |     |                          |      |              |      |              |   |                 |          |          |          |                                  |      |       |      |     |                                    |      |       |      |     |                                   |      |     |      |     |                                       |      |     |      |     |  |      |     |      |     |  |      |    |      |    |                                     |      |     |      |     |   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |
| 1051   | 130   | 2051              | 65             | Surcharge - late filing fee or oath  |                 |                 |                |           |   |                  |      |      |        |  |                                     |      |      |      |      |  |                   |     |      |     |                           |      |                  |      |       |  |      |      |                    |      |  |      |        |      |                        |   |  |     |      |              |  |                |     |          |     |   |      |     |      |     |  |      |       |              |     |   |      |       |      |       |  |                    |     |        |     |                  |      |     |      |                    |  |      |     |      |     |                          |      |              |      |              |   |                 |          |          |          |                                  |      |       |      |     |                                    |      |       |      |     |                                   |      |     |      |     |                                       |      |     |      |     |  |      |     |      |     |  |      |    |      |    |                                     |      |     |      |     |   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |
| 1052   | 50  | 2052              | 25             | Surcharge - late provisional filing fee or cover sheet                     |                 |                 |                |           |   |                  |      |      |        |  |                                     |      |      |      |      |  |                   |     |      |     |                           |      |                  |      |       |  |      |      |                    |      |  |      |        |      |                        |   |  |     |      |              |  |                |     |          |     |   |      |     |      |     |  |      |       |              |     |   |      |       |      |       |  |                    |     |        |     |                  |      |     |      |                    |  |      |     |      |     |                          |      |              |      |              |   |                 |          |          |          |                                  |      |       |      |     |                                    |      |       |      |     |                                   |      |     |      |     |                                       |      |     |      |     |  |      |     |      |     |  |      |    |      |    |                                     |      |     |      |     |   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |
| 1053   | 130   | 1053              | 130            | Non-English specification  |                 |                 |                |           |   |                  |      |      |        |  |                                     |      |      |      |      |  |                   |     |      |     |                           |      |                  |      |       |  |      |      |                    |      |  |      |        |      |                        |   |  |     |      |              |  |                |     |          |     |   |      |     |      |     |  |      |       |              |     |   |      |       |      |       |  |                    |     |        |     |                  |      |     |      |                    |  |      |     |      |     |                          |      |              |      |              |   |                 |          |          |          |                                  |      |       |      |     |                                    |      |       |      |     |                                   |      |     |      |     |                                       |      |     |      |     |  |      |     |      |     |  |      |    |      |    |                                     |      |     |      |     |   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |
| 1812   | 2,520   | 1812              | 2,520          | For filing a request for <i>ex parte</i> reexamination                     |                 |                 |                |           |   |                  |      |      |        |  |                                     |      |      |      |      |  |                   |     |      |     |                           |      |                  |      |       |  |      |      |                    |      |  |      |        |      |                        |   |  |     |      |              |  |                |     |          |     |   |      |     |      |     |  |      |       |              |     |   |      |       |      |       |  |                    |     |        |     |                  |      |     |      |                    |  |      |     |      |     |                          |      |              |      |              |   |                 |          |          |          |                                  |      |       |      |     |                                    |      |       |      |     |                                   |      |     |      |     |                                       |      |     |      |     |  |      |     |      |     |  |      |    |      |    |                                     |      |     |      |     |   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |
| 1804   | 920*  | 1804              | 920*           | Requesting publication of SIR prior to Examiner action                     |                 |                 |                |           |   |                  |      |      |        |  |                                     |      |      |      |      |  |                   |     |      |     |                           |      |                  |      |       |  |      |      |                    |      |  |      |        |      |                        |   |  |     |      |              |  |                |     |          |     |   |      |     |      |     |  |      |       |              |     |   |      |       |      |       |  |                    |     |        |     |                  |      |     |      |                    |  |      |     |      |     |                          |      |              |      |              |   |                 |          |          |          |                                  |      |       |      |     |                                    |      |       |      |     |                                   |      |     |      |     |                                       |      |     |      |     |  |      |     |      |     |  |      |    |      |    |                                     |      |     |      |     |   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |
| 1805   | 1,840*  | 1805              | 1,840*         | Requesting publication of SIR after Examiner action                        |                 |                 |                |           |   |                  |      |      |        |  |                                     |      |      |      |      |  |                   |     |      |     |                           |      |                  |      |       |  |      |      |                    |      |  |      |        |      |                        |   |  |     |      |              |  |                |     |          |     |   |      |     |      |     |  |      |       |              |     |   |      |       |      |       |  |                    |     |        |     |                  |      |     |      |                    |  |      |     |      |     |                          |      |              |      |              |   |                 |          |          |          |                                  |      |       |      |     |                                    |      |       |      |     |                                   |      |     |      |     |                                       |      |     |      |     |  |      |     |      |     |  |      |    |      |    |                                     |      |     |      |     |   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |
| 1251   | 110   | 2251              | 55             | Extension for reply within first month                                     |                 |                 |                |           |   |                  |      |      |        |  |                                     |      |      |      |      |  |                   |     |      |     |                           |      |                  |      |       |  |      |      |                    |      |  |      |        |      |                        |   |  |     |      |              |  |                |     |          |     |   |      |     |      |     |  |      |       |              |     |   |      |       |      |       |  |                    |     |        |     |                  |      |     |      |                    |  |      |     |      |     |                          |      |              |      |              |   |                 |          |          |          |                                  |      |       |      |     |                                    |      |       |      |     |                                   |      |     |      |     |                                       |      |     |      |     |  |      |     |      |     |  |      |    |      |    |                                     |      |     |      |     |   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |
| 1252   | 420   | 2252              | 210            | Extension for reply within second month                                    |                 |                 |                |           |   |                  |      |      |        |  |                                     |      |      |      |      |  |                   |     |      |     |                           |      |                  |      |       |  |      |      |                    |      |  |      |        |      |                        |   |  |     |      |              |  |                |     |          |     |   |      |     |      |     |  |      |       |              |     |   |      |       |      |       |  |                    |     |        |     |                  |      |     |      |                    |  |      |     |      |     |                          |      |              |      |              |   |                 |          |          |          |                                  |      |       |      |     |                                    |      |       |      |     |                                   |      |     |      |     |                                       |      |     |      |     |  |      |     |      |     |  |      |    |      |    |                                     |      |     |      |     |   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |
| 1253   | 950   | 2253              | 475            | Extension for reply within third month                                     |                 |                 |                |           |   |                  |      |      |        |  |                                     |      |      |      |      |  |                   |     |      |     |                           |      |                  |      |       |  |      |      |                    |      |  |      |        |      |                        |   |  |     |      |              |  |                |     |          |     |   |      |     |      |     |  |      |       |              |     |   |      |       |      |       |  |                    |     |        |     |                  |      |     |      |                    |  |      |     |      |     |                          |      |              |      |              |   |                 |          |          |          |                                  |      |       |      |     |                                    |      |       |      |     |                                   |      |     |      |     |                                       |      |     |      |     |  |      |     |      |     |  |      |    |      |    |                                     |      |     |      |     |   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |
| 1254   | 1,480   | 2254              | 740            | Extension for reply within fourth month                                    |                 |                 |                |           |   |                  |      |      |        |  |                                     |      |      |      |      |  |                   |     |      |     |                           |      |                  |      |       |  |      |      |                    |      |  |      |        |      |                        |   |  |     |      |              |  |                |     |          |     |   |      |     |      |     |  |      |       |              |     |   |      |       |      |       |  |                    |     |        |     |                  |      |     |      |                    |  |      |     |      |     |                          |      |              |      |              |   |                 |          |          |          |                                  |      |       |      |     |                                    |      |       |      |     |                                   |      |     |      |     |                                       |      |     |      |     |  |      |     |      |     |  |      |    |      |    |                                     |      |     |      |     |   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |
| 1255   | 2,010   | 2255              | 1,005          | Extension for reply within fifth month                                     |                 |                 |                |           |   |                  |      |      |        |  |                                     |      |      |      |      |  |                   |     |      |     |                           |      |                  |      |       |  |      |      |                    |      |  |      |        |      |                        |   |  |     |      |              |  |                |     |          |     |   |      |     |      |     |  |      |       |              |     |   |      |       |      |       |  |                    |     |        |     |                  |      |     |      |                    |  |      |     |      |     |                          |      |              |      |              |   |                 |          |          |          |                                  |      |       |      |     |                                    |      |       |      |     |                                   |      |     |      |     |                                       |      |     |      |     |  |      |     |      |     |  |      |    |      |    |                                     |      |     |      |     |   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |
| 1401   | 330   | 2401              | 165            | Notice of Appeal   |                 |                 |                |           |   |                  |      |      |        |  |                                     |      |      |      |      |  |                   |     |      |     |                           |      |                  |      |       |  |      |      |                    |      |  |      |        |      |                        |   |  |     |      |              |  |                |     |          |     |   |      |     |      |     |  |      |       |              |     |   |      |       |      |       |  |                    |     |        |     |                  |      |     |      |                    |  |      |     |      |     |                          |      |              |      |              |   |                 |          |          |          |                                  |      |       |      |     |                                    |      |       |      |     |                                   |      |     |      |     |                                       |      |     |      |     |  |      |     |      |     |  |      |    |      |    |                                     |      |     |      |     |   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |
| 1402   | 330   | 2402              | 165            | Filing a brief in support of an appeal                                     |                 |                 |                |           |   |                  |      |      |        |  |                                     |      |      |      |      |  |                   |     |      |     |                           |      |                  |      |       |  |      |      |                    |      |  |      |        |      |                        |   |  |     |      |              |  |                |     |          |     |   |      |     |      |     |  |      |       |              |     |   |      |       |      |       |  |                    |     |        |     |                  |      |     |      |                    |  |      |     |      |     |                          |      |              |      |              |   |                 |          |          |          |                                  |      |       |      |     |                                    |      |       |      |     |                                   |      |     |      |     |                                       |      |     |      |     |  |      |     |      |     |  |      |    |      |    |                                     |      |     |      |     |   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |
| 1403   | 290   | 2403              | 145            | Request for oral hearing   |                 |                 |                |           |   |                  |      |      |        |  |                                     |      |      |      |      |  |                   |     |      |     |                           |      |                  |      |       |  |      |      |                    |      |  |      |        |      |                        |   |  |     |      |              |  |                |     |          |     |   |      |     |      |     |  |      |       |              |     |   |      |       |      |       |  |                    |     |        |     |                  |      |     |      |                    |  |      |     |      |     |                          |      |              |      |              |   |                 |          |          |          |                                  |      |       |      |     |                                    |      |       |      |     |                                   |      |     |      |     |                                       |      |     |      |     |  |      |     |      |     |  |      |    |      |    |                                     |      |     |      |     |   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |
| 1451   | 1,510   | 1451              | 1,510          | Petition to institute a public use proceeding                              |                 |                 |                |           |   |                  |      |      |        |  |                                     |      |      |      |      |  |                   |     |      |     |                           |      |                  |      |       |  |      |      |                    |      |  |      |        |      |                        |   |  |     |      |              |  |                |     |          |     |   |      |     |      |     |  |      |       |              |     |   |      |       |      |       |  |                    |     |        |     |                  |      |     |      |                    |  |      |     |      |     |                          |      |              |      |              |   |                 |          |          |          |                                  |      |       |      |     |                                    |      |       |      |     |                                   |      |     |      |     |                                       |      |     |      |     |  |      |     |      |     |  |      |    |      |    |                                     |      |     |      |     |   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |
| 1452   | 110   | 2452              | 55             | Petition to revive - unavoidable   |                 |                 |                |           |   |                  |      |      |        |  |                                     |      |      |      |      |  |                   |     |      |     |                           |      |                  |      |       |  |      |      |                    |      |  |      |        |      |                        |   |  |     |      |              |  |                |     |          |     |   |      |     |      |     |  |      |       |              |     |   |      |       |      |       |  |                    |     |        |     |                  |      |     |      |                    |  |      |     |      |     |                          |      |              |      |              |   |                 |          |          |          |                                  |      |       |      |     |                                    |      |       |      |     |                                   |      |     |      |     |                                       |      |     |      |     |  |      |     |      |     |  |      |    |      |    |                                     |      |     |      |     |   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |
| 1453   | 1,330   | 2453              | 665            | Petition to revive - unintentional   |                 |                 |                |           |   |                  |      |      |        |  |                                     |      |      |      |      |  |                   |     |      |     |                           |      |                  |      |       |  |      |      |                    |      |  |      |        |      |                        |   |  |     |      |              |  |                |     |          |     |   |      |     |      |     |  |      |       |              |     |   |      |       |      |       |  |                    |     |        |     |                  |      |     |      |                    |  |      |     |      |     |                          |      |              |      |              |   |                 |          |          |          |                                  |      |       |      |     |                                    |      |       |      |     |                                   |      |     |      |     |                                       |      |     |      |     |  |      |     |      |     |  |      |    |      |    |                                     |      |     |      |     |   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |
| 1501   | 1,330   | 2501              | 665            | Utility issue fee (or reissue)   |                 |                 |                |           |   |                  |      |      |        |  |                                     |      |      |      |      |  |                   |     |      |     |                           |      |                  |      |       |  |      |      |                    |      |  |      |        |      |                        |   |  |     |      |              |  |                |     |          |     |   |      |     |      |     |  |      |       |              |     |   |      |       |      |       |  |                    |     |        |     |                  |      |     |      |                    |  |      |     |      |     |                          |      |              |      |              |   |                 |          |          |          |                                  |      |       |      |     |                                    |      |       |      |     |                                   |      |     |      |     |                                       |      |     |      |     |  |      |     |      |     |  |      |    |      |    |                                     |      |     |      |     |   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |
| 1502   | 480   | 2502              | 240            | Design issue fee   |                 |                 |                |           |   |                  |      |      |        |  |                                     |      |      |      |      |  |                   |     |      |     |                           |      |                  |      |       |  |      |      |                    |      |  |      |        |      |                        |   |  |     |      |              |  |                |     |          |     |   |      |     |      |     |  |      |       |              |     |   |      |       |      |       |  |                    |     |        |     |                  |      |     |      |                    |  |      |     |      |     |                          |      |              |      |              |   |                 |          |          |          |                                  |      |       |      |     |                                    |      |       |      |     |                                   |      |     |      |     |                                       |      |     |      |     |  |      |     |      |     |  |      |    |      |    |                                     |      |     |      |     |   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |
| 1503   | 640   | 2503              | 320            | Plant issue fee  |                 |                 |                |           |   |                  |      |      |        |  |                                     |      |      |      |      |  |                   |     |      |     |                           |      |                  |      |       |  |      |      |                    |      |  |      |        |      |                        |   |  |     |      |              |  |                |     |          |     |   |      |     |      |     |  |      |       |              |     |   |      |       |      |       |  |                    |     |        |     |                  |      |     |      |                    |  |      |     |      |     |                          |      |              |      |              |   |                 |          |          |          |                                  |      |       |      |     |                                    |      |       |      |     |                                   |      |     |      |     |                                       |      |     |      |     |  |      |     |      |     |  |      |    |      |    |                                     |      |     |      |     |   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |
| 1460   | 130   | 1460              | 130            | Petitions to the Commissioner  |                 |                 |                |           |   |                  |      |      |        |  |                                     |      |      |      |      |  |                   |     |      |     |                           |      |                  |      |       |  |      |      |                    |      |  |      |        |      |                        |   |  |     |      |              |  |                |     |          |     |   |      |     |      |     |  |      |       |              |     |   |      |       |      |       |  |                    |     |        |     |                  |      |     |      |                    |  |      |     |      |     |                          |      |              |      |              |   |                 |          |          |          |                                  |      |       |      |     |                                    |      |       |      |     |                                   |      |     |      |     |                                       |      |     |      |     |  |      |     |      |     |  |      |    |      |    |                                     |      |     |      |     |   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |
| 1807   | 50  | 1807              | 50             | Processing fee under 37 CFR 1.17(q)  |                 |                 |                |           |   |                  |      |      |        |  |                                     |      |      |      |      |  |                   |     |      |     |                           |      |                  |      |       |  |      |      |                    |      |  |      |        |      |                        |   |  |     |      |              |  |                |     |          |     |   |      |     |      |     |  |      |       |              |     |   |      |       |      |       |  |                    |     |        |     |                  |      |     |      |                    |  |      |     |      |     |                          |      |              |      |              |   |                 |          |          |          |                                  |      |       |      |     |                                    |      |       |      |     |                                   |      |     |      |     |                                       |      |     |      |     |  |      |     |      |     |  |      |    |      |    |                                     |      |     |      |     |   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |
| 1806   | 180   | 1806              | 180            | Submission of Information Disclosure Stmt                                  |                 |                 |                |           |   |                  |      |      |        |  |                                     |      |      |      |      |  |                   |     |      |     |                           |      |                  |      |       |  |      |      |                    |      |  |      |        |      |                        |   |  |     |      |              |  |                |     |          |     |   |      |     |      |     |  |      |       |              |     |   |      |       |      |       |  |                    |     |        |     |                  |      |     |      |                    |  |      |     |      |     |                          |      |              |      |              |   |                 |          |          |          |                                  |      |       |      |     |                                    |      |       |      |     |                                   |      |     |      |     |                                       |      |     |      |     |  |      |     |      |     |  |      |    |      |    |                                     |      |     |      |     |   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |
| 8021   | 40  | 8021              | 40             | Recording each patent assignment per property (times number of properties) |                 |                 |                |           |   |                  |      |      |        |  |                                     |      |      |      |      |  |                   |     |      |     |                           |      |                  |      |       |  |      |      |                    |      |  |      |        |      |                        |   |  |     |      |              |  |                |     |          |     |   |      |     |      |     |  |      |       |              |     |   |      |       |      |       |  |                    |     |        |     |                  |      |     |      |                    |  |      |     |      |     |                          |      |              |      |              |   |                 |          |          |          |                                  |      |       |      |     |                                    |      |       |      |     |                                   |      |     |      |     |                                       |      |     |      |     |  |      |     |      |     |  |      |    |      |    |                                     |      |     |      |     |   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |
| 1809   | 770   | 2809              | 385            | Filing a submission after final rejection (37 CFR 1.129(a))                |                 |                 |                |           |   |                  |      |      |        |  |                                     |      |      |      |      |  |                   |     |      |     |                           |      |                  |      |       |  |      |      |                    |      |  |      |        |      |                        |   |  |     |      |              |  |                |     |          |     |   |      |     |      |     |  |      |       |              |     |   |      |       |      |       |  |                    |     |        |     |                  |      |     |      |                    |  |      |     |      |     |                          |      |              |      |              |   |                 |          |          |          |                                  |      |       |      |     |                                    |      |       |      |     |                                   |      |     |      |     |                                       |      |     |      |     |  |      |     |      |     |  |      |    |      |    |                                     |      |     |      |     |   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |
| 1810   | 770   | 2810              | 385            | For each additional invention to be examined (37 CFR 1.129(b))             |                 |                 |                |           |   |                  |      |      |        |  |                                     |      |      |      |      |  |                   |     |      |     |                           |      |                  |      |       |  |      |      |                    |      |  |      |        |      |                        |   |  |     |      |              |  |                |     |          |     |   |      |     |      |     |  |      |       |              |     |   |      |       |      |       |  |                    |     |        |     |                  |      |     |      |                    |  |      |     |      |     |                          |      |              |      |              |   |                 |          |          |          |                                  |      |       |      |     |                                    |      |       |      |     |                                   |      |     |      |     |                                       |      |     |      |     |  |      |     |      |     |  |      |    |      |    |                                     |      |     |      |     |   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |
| 1801   | 770   | 2801              | 385            | Request for Continued Examination (RCE)                                    |                 |                 |                |           |   |                  |      |      |        |  |                                     |      |      |      |      |  |                   |     |      |     |                           |      |                  |      |       |  |      |      |                    |      |  |      |        |      |                        |   |  |     |      |              |  |                |     |          |     |   |      |     |      |     |  |      |       |              |     |   |      |       |      |       |  |                    |     |        |     |                  |      |     |      |                    |  |      |     |      |     |                          |      |              |      |              |   |                 |          |          |          |                                  |      |       |      |     |                                    |      |       |      |     |                                   |      |     |      |     |                                       |      |     |      |     |  |      |     |      |     |  |      |    |      |    |                                     |      |     |      |     |   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |
| 1802   | 900   | 1802              | 900            | Request for expedited examination of a design application                  |                 |                 |                |           |   |                  |      |      |        |  |                                     |      |      |      |      |  |                   |     |      |     |                           |      |                  |      |       |  |      |      |                    |      |  |      |        |      |                        |   |  |     |      |              |  |                |     |          |     |   |      |     |      |     |  |      |       |              |     |   |      |       |      |       |  |                    |     |        |     |                  |      |     |      |                    |  |      |     |      |     |                          |      |              |      |              |   |                 |          |          |          |                                  |      |       |      |     |                                    |      |       |      |     |                                   |      |     |      |     |                                       |      |     |      |     |  |      |     |      |     |  |      |    |      |    |                                     |      |     |      |     |   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |
| <h3>1. BASIC FILING FEE</h3> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1001</td><td>770</td><td>2001</td><td>385</td><td>Utility filing fee</td><td></td></tr> <tr><td>1002</td><td>340</td><td>2002</td><td>170</td><td>Design filing fee</td><td></td></tr> <tr><td>1003</td><td>530</td><td>2003</td><td>265</td><td>Plant filing fee</td><td></td></tr> <tr><td>1004</td><td>770</td><td>2004</td><td>385</td><td>Reissue filing fee</td><td></td></tr> <tr><td>1005</td><td>160</td><td>2005</td><td>80</td><td>Provisional filing fee</td><td></td></tr> </tbody> </table> <div style="text-align: right; margin-top: 10px;"> <b>SUBTOTAL (1) (\$ 0)</b> </div>   | Large Entity  |                   | Small Entity   |  | Fee Description | Fee Paid        | Fee Code       | Fee (\$)  | Fee Code  | Fee (\$)         | 1001 | 770  | 2001   | 385  | Utility filing fee                  |      | 1002 | 340  | 2002 | 170  | Design filing fee |     | 1003 | 530 | 2003                      | 265  | Plant filing fee |      | 1004  | 770  | 2004 | 385  | Reissue filing fee |      | 1005   | 160  | 2005   | 80   | Provisional filing fee |   | <h3>2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE</h3> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2"></th> <th colspan="2">Extra Claims</th> <th colspan="2">Fee from below</th> <th colspan="2">Fee Paid</th> </tr> <tr> <th colspan="2"></th> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th> </tr> </thead> <tbody> <tr> <td>Total Claims</td> <td></td> <td>-20** =</td> <td></td> <td>X</td> <td></td> <td>=</td> <td>0</td> </tr> <tr> <td>Independent Claims</td> <td></td> <td>-3** =</td> <td></td> <td>X</td> <td></td> <td>=</td> <td>0</td> </tr> <tr> <td>Multiple Dependent</td> <td></td> <td></td> <td></td> <td>X</td> <td></td> <td>=</td> <td>0</td> </tr> </tbody> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1202</td><td>18</td><td>2202</td><td>9</td><td>Claims in excess of 20</td></tr> <tr><td>1201</td><td>86</td><td>2201</td><td>43</td><td>Independent claims in excess of 3</td></tr> <tr><td>1203</td><td>290</td><td>2203</td><td>145</td><td>Multiple dependent claim, if not paid</td></tr> <tr><td>1204</td><td>86</td><td>2204</td><td>43</td><td>** Reissue independent claims over original patent</td></tr> <tr><td>1205</td><td>18</td><td>2205</td><td>9</td><td>** Reissue claims in excess of 20 and over original patent</td></tr> </tbody> </table> <div style="text-align: right; margin-top: 10px;"> <b>SUBTOTAL (2) (\$ 0)</b> </div> <p style="font-size: x-small; margin-top: 10px;">**or number previously paid, if greater, For Reissues, see above</p> |     |      | Extra Claims |  | Fee from below |     | Fee Paid |     |   |      |     |      |     |  |      |       | Total Claims |     | -20** =                                 |      | X     |      | =     | 0                                      | Independent Claims |     | -3** = |     | X                |      | =   | 0    | Multiple Dependent |  |      |     | X    |     | =                        | 0    | Large Entity |      | Small Entity |   | Fee Description | Fee Code | Fee (\$) | Fee Code | Fee (\$)                         | 1202 | 18    | 2202 | 9   | Claims in excess of 20             | 1201 | 86    | 2201 | 43  | Independent claims in excess of 3 | 1203 | 290 | 2203 | 145 | Multiple dependent claim, if not paid | 1204 | 86  | 2204 | 43  | ** Reissue independent claims over original patent | 1205 | 18  | 2205 | 9   | ** Reissue claims in excess of 20 and over original patent |      |    |      |    |                                     |      |     |      |     |   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |
| Large Entity   |   | Small Entity      |                | Fee Description  |                 |                 | Fee Paid       |           |   |                  |      |      |        |  |                                     |      |      |      |      |  |                   |     |      |     |                           |      |                  |      |       |  |      |      |                    |      |  |      |        |      |                        |   |  |     |      |              |  |                |     |          |     |   |      |     |      |     |  |      |       |              |     |   |      |       |      |       |  |                    |     |        |     |                  |      |     |      |                    |  |      |     |      |     |                          |      |              |      |              |   |                 |          |          |          |                                  |      |       |      |     |                                    |      |       |      |     |                                   |      |     |      |     |                                       |      |     |      |     |  |      |     |      |     |  |      |    |      |    |                                     |      |     |      |     |   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |
| Fee Code   | Fee (\$)  | Fee Code          | Fee (\$)       |  |                 |                 |                |           |   |                  |      |      |        |  |                                     |      |      |      |      |  |                   |     |      |     |                           |      |                  |      |       |  |      |      |                    |      |  |      |        |      |                        |   |  |     |      |              |  |                |     |          |     |   |      |     |      |     |  |      |       |              |     |   |      |       |      |       |  |                    |     |        |     |                  |      |     |      |                    |  |      |     |      |     |                          |      |              |      |              |   |                 |          |          |          |                                  |      |       |      |     |                                    |      |       |      |     |                                   |      |     |      |     |                                       |      |     |      |     |  |      |     |      |     |  |      |    |      |    |                                     |      |     |      |     |   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |
| 1001   | 770   | 2001              | 385            | Utility filing fee   |                 |                 |                |           |   |                  |      |      |        |  |                                     |      |      |      |      |  |                   |     |      |     |                           |      |                  |      |       |  |      |      |                    |      |  |      |        |      |                        |   |  |     |      |              |  |                |     |          |     |   |      |     |      |     |  |      |       |              |     |   |      |       |      |       |  |                    |     |        |     |                  |      |     |      |                    |  |      |     |      |     |                          |      |              |      |              |   |                 |          |          |          |                                  |      |       |      |     |                                    |      |       |      |     |                                   |      |     |      |     |                                       |      |     |      |     |  |      |     |      |     |  |      |    |      |    |                                     |      |     |      |     |   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |
| 1002   | 340   | 2002              | 170            | Design filing fee  |                 |                 |                |           |   |                  |      |      |        |  |                                     |      |      |      |      |  |                   |     |      |     |                           |      |                  |      |       |  |      |      |                    |      |  |      |        |      |                        |   |  |     |      |              |  |                |     |          |     |   |      |     |      |     |  |      |       |              |     |   |      |       |      |       |  |                    |     |        |     |                  |      |     |      |                    |  |      |     |      |     |                          |      |              |      |              |   |                 |          |          |          |                                  |      |       |      |     |                                    |      |       |      |     |                                   |      |     |      |     |                                       |      |     |      |     |  |      |     |      |     |  |      |    |      |    |                                     |      |     |      |     |   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |
| 1003   | 530   | 2003              | 265            | Plant filing fee   |                 |                 |                |           |   |                  |      |      |        |  |                                     |      |      |      |      |  |                   |     |      |     |                           |      |                  |      |       |  |      |      |                    |      |  |      |        |      |                        |   |  |     |      |              |  |                |     |          |     |   |      |     |      |     |  |      |       |              |     |   |      |       |      |       |  |                    |     |        |     |                  |      |     |      |                    |  |      |     |      |     |                          |      |              |      |              |   |                 |          |          |          |                                  |      |       |      |     |                                    |      |       |      |     |                                   |      |     |      |     |                                       |      |     |      |     |  |      |     |      |     |  |      |    |      |    |                                     |      |     |      |     |   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |
| 1004   | 770   | 2004              | 385            | Reissue filing fee   |                 |                 |                |           |   |                  |      |      |        |  |                                     |      |      |      |      |  |                   |     |      |     |                           |      |                  |      |       |  |      |      |                    |      |  |      |        |      |                        |   |  |     |      |              |  |                |     |          |     |   |      |     |      |     |  |      |       |              |     |   |      |       |      |       |  |                    |     |        |     |                  |      |     |      |                    |  |      |     |      |     |                          |      |              |      |              |   |                 |          |          |          |                                  |      |       |      |     |                                    |      |       |      |     |                                   |      |     |      |     |                                       |      |     |      |     |  |      |     |      |     |  |      |    |      |    |                                     |      |     |      |     |   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |
| 1005   | 160   | 2005              | 80             | Provisional filing fee   |                 |                 |                |           |   |                  |      |      |        |  |                                     |      |      |      |      |  |                   |     |      |     |                           |      |                  |      |       |  |      |      |                    |      |  |      |        |      |                        |   |  |     |      |              |  |                |     |          |     |   |      |     |      |     |  |      |       |              |     |   |      |       |      |       |  |                    |     |        |     |                  |      |     |      |                    |  |      |     |      |     |                          |      |              |      |              |   |                 |          |          |          |                                  |      |       |      |     |                                    |      |       |      |     |                                   |      |     |      |     |                                       |      |     |      |     |  |      |     |      |     |  |      |    |      |    |                                     |      |     |      |     |   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |
|  |   | Extra Claims      |                | Fee from below   |                 | Fee Paid        |                |           |   |                  |      |      |        |  |                                     |      |      |      |      |  |                   |     |      |     |                           |      |                  |      |       |  |      |      |                    |      |  |      |        |      |                        |   |  |     |      |              |  |                |     |          |     |   |      |     |      |     |  |      |       |              |     |   |      |       |      |       |  |                    |     |        |     |                  |      |     |      |                    |  |      |     |      |     |                          |      |              |      |              |   |                 |          |          |          |                                  |      |       |      |     |                                    |      |       |      |     |                                   |      |     |      |     |                                       |      |     |      |     |  |      |     |      |     |  |      |    |      |    |                                     |      |     |      |     |   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |
|  |   |                   |                |  |                 |                 |                |           |   |                  |      |      |        |  |                                     |      |      |      |      |  |                   |     |      |     |                           |      |                  |      |       |  |      |      |                    |      |  |      |        |      |                        |   |  |     |      |              |  |                |     |          |     |   |      |     |      |     |  |      |       |              |     |   |      |       |      |       |  |                    |     |        |     |                  |      |     |      |                    |  |      |     |      |     |                          |      |              |      |              |   |                 |          |          |          |                                  |      |       |      |     |                                    |      |       |      |     |                                   |      |     |      |     |                                       |      |     |      |     |  |      |     |      |     |  |      |    |      |    |                                     |      |     |      |     |   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |
| Total Claims   |   | -20** =           |                | X  |                 | =               | 0              |           |   |                  |      |      |        |  |                                     |      |      |      |      |  |                   |     |      |     |                           |      |                  |      |       |  |      |      |                    |      |  |      |        |      |                        |   |  |     |      |              |  |                |     |          |     |   |      |     |      |     |  |      |       |              |     |   |      |       |      |       |  |                    |     |        |     |                  |      |     |      |                    |  |      |     |      |     |                          |      |              |      |              |   |                 |          |          |          |                                  |      |       |      |     |                                    |      |       |      |     |                                   |      |     |      |     |                                       |      |     |      |     |  |      |     |      |     |  |      |    |      |    |                                     |      |     |      |     |   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |
| Independent Claims   |   | -3** =            |                | X  |                 | =               | 0              |           |   |                  |      |      |        |  |                                     |      |      |      |      |  |                   |     |      |     |                           |      |                  |      |       |  |      |      |                    |      |  |      |        |      |                        |   |  |     |      |              |  |                |     |          |     |   |      |     |      |     |  |      |       |              |     |   |      |       |      |       |  |                    |     |        |     |                  |      |     |      |                    |  |      |     |      |     |                          |      |              |      |              |   |                 |          |          |          |                                  |      |       |      |     |                                    |      |       |      |     |                                   |      |     |      |     |                                       |      |     |      |     |  |      |     |      |     |  |      |    |      |    |                                     |      |     |      |     |   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |
| Multiple Dependent   |   |                   |                | X  |                 | =               | 0              |           |   |                  |      |      |        |  |                                     |      |      |      |      |  |                   |     |      |     |                           |      |                  |      |       |  |      |      |                    |      |  |      |        |      |                        |   |  |     |      |              |  |                |     |          |     |   |      |     |      |     |  |      |       |              |     |   |      |       |      |       |  |                    |     |        |     |                  |      |     |      |                    |  |      |     |      |     |                          |      |              |      |              |   |                 |          |          |          |                                  |      |       |      |     |                                    |      |       |      |     |                                   |      |     |      |     |                                       |      |     |      |     |  |      |     |      |     |  |      |    |      |    |                                     |      |     |      |     |   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |
| Large Entity   |   | Small Entity      |                | Fee Description  |                 |                 |                |           |   |                  |      |      |        |  |                                     |      |      |      |      |  |                   |     |      |     |                           |      |                  |      |       |  |      |      |                    |      |  |      |        |      |                        |   |  |     |      |              |  |                |     |          |     |   |      |     |      |     |  |      |       |              |     |   |      |       |      |       |  |                    |     |        |     |                  |      |     |      |                    |  |      |     |      |     |                          |      |              |      |              |   |                 |          |          |          |                                  |      |       |      |     |                                    |      |       |      |     |                                   |      |     |      |     |                                       |      |     |      |     |  |      |     |      |     |  |      |    |      |    |                                     |      |     |      |     |   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |
| Fee Code   | Fee (\$)  | Fee Code          | Fee (\$)       |  |                 |                 |                |           |   |                  |      |      |        |  |                                     |      |      |      |      |  |                   |     |      |     |                           |      |                  |      |       |  |      |      |                    |      |  |      |        |      |                        |   |  |     |      |              |  |                |     |          |     |   |      |     |      |     |  |      |       |              |     |   |      |       |      |       |  |                    |     |        |     |                  |      |     |      |                    |  |      |     |      |     |                          |      |              |      |              |   |                 |          |          |          |                                  |      |       |      |     |                                    |      |       |      |     |                                   |      |     |      |     |                                       |      |     |      |     |  |      |     |      |     |  |      |    |      |    |                                     |      |     |      |     |   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |
| 1202   | 18  | 2202              | 9              | Claims in excess of 20   |                 |                 |                |           |   |                  |      |      |        |  |                                     |      |      |      |      |  |                   |     |      |     |                           |      |                  |      |       |  |      |      |                    |      |  |      |        |      |                        |   |  |     |      |              |  |                |     |          |     |   |      |     |      |     |  |      |       |              |     |   |      |       |      |       |  |                    |     |        |     |                  |      |     |      |                    |  |      |     |      |     |                          |      |              |      |              |   |                 |          |          |          |                                  |      |       |      |     |                                    |      |       |      |     |                                   |      |     |      |     |                                       |      |     |      |     |  |      |     |      |     |  |      |    |      |    |                                     |      |     |      |     |   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |
| 1201   | 86  | 2201              | 43             | Independent claims in excess of 3  |                 |                 |                |           |   |                  |      |      |        |  |                                     |      |      |      |      |  |                   |     |      |     |                           |      |                  |      |       |  |      |      |                    |      |  |      |        |      |                        |   |  |     |      |              |  |                |     |          |     |   |      |     |      |     |  |      |       |              |     |   |      |       |      |       |  |                    |     |        |     |                  |      |     |      |                    |  |      |     |      |     |                          |      |              |      |              |   |                 |          |          |          |                                  |      |       |      |     |                                    |      |       |      |     |                                   |      |     |      |     |                                       |      |     |      |     |  |      |     |      |     |  |      |    |      |    |                                     |      |     |      |     |   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |
| 1203   | 290   | 2203              | 145            | Multiple dependent claim, if not paid                                      |                 |                 |                |           |   |                  |      |      |        |  |                                     |      |      |      |      |  |                   |     |      |     |                           |      |                  |      |       |  |      |      |                    |      |  |      |        |      |                        |   |  |     |      |              |  |                |     |          |     |   |      |     |      |     |  |      |       |              |     |   |      |       |      |       |  |                    |     |        |     |                  |      |     |      |                    |  |      |     |      |     |                          |      |              |      |              |   |                 |          |          |          |                                  |      |       |      |     |                                    |      |       |      |     |                                   |      |     |      |     |                                       |      |     |      |     |  |      |     |      |     |  |      |    |      |    |                                     |      |     |      |     |   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |
| 1204   | 86  | 2204              | 43             | ** Reissue independent claims over original patent                         |                 |                 |                |           |   |                  |      |      |        |  |                                     |      |      |      |      |  |                   |     |      |     |                           |      |                  |      |       |  |      |      |                    |      |  |      |        |      |                        |   |  |     |      |              |  |                |     |          |     |   |      |     |      |     |  |      |       |              |     |   |      |       |      |       |  |                    |     |        |     |                  |      |     |      |                    |  |      |     |      |     |                          |      |              |      |              |   |                 |          |          |          |                                  |      |       |      |     |                                    |      |       |      |     |                                   |      |     |      |     |                                       |      |     |      |     |  |      |     |      |     |  |      |    |      |    |                                     |      |     |      |     |   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |
| 1205   | 18  | 2205              | 9              | ** Reissue claims in excess of 20 and over original patent                 |                 |                 |                |           |   |                  |      |      |        |  |                                     |      |      |      |      |  |                   |     |      |     |                           |      |                  |      |       |  |      |      |                    |      |  |      |        |      |                        |   |  |     |      |              |  |                |     |          |     |   |      |     |      |     |  |      |       |              |     |   |      |       |      |       |  |                    |     |        |     |                  |      |     |      |                    |  |      |     |      |     |                          |      |              |      |              |   |                 |          |          |          |                                  |      |       |      |     |                                    |      |       |      |     |                                   |      |     |      |     |                                       |      |     |      |     |  |      |     |      |     |  |      |    |      |    |                                     |      |     |      |     |   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |
| <h3>SUBMITTED BY</h3> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%;">Name (Print/Type)</td> <td>Joseph M. Noto</td> <td style="width: 20%;">Registration No.</td> <td>32,163</td> <td style="width: 20%;">Telephone</td> <td>(585) 263-1601</td> </tr> <tr> <td>Signature</td> <td></td> <td>(Attorney/Agent)</td> <td></td> <td>Date</td> <td>4/2/04</td> </tr> </table>  |   | Name (Print/Type) | Joseph M. Noto | Registration No.   | 32,163          | Telephone       | (585) 263-1601 | Signature |  | (Attorney/Agent) |      | Date | 4/2/04 | <h3>CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.8(a)]</h3> <p>I hereby certify that this correspondence is being:</p> <div style="display: flex; justify-content: space-between;"> <input checked="" type="checkbox"/> deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop _____, Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450           <div style="text-align: right;"> <p style="font-size: x-small;">Date</p> <p style="font-size: x-small;">Signature</p> <p style="font-size: x-small;">Typed or printed name</p> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="text-align: center;"> <p style="font-size: x-small;">Date</p> <p style="font-size: x-small;">Signature</p> <p style="font-size: x-small;">Typed or printed name</p> </div> <div style="text-align: center;"> <p style="font-size: x-small;">Date</p> <p style="font-size: x-small;">Signature</p> <p style="font-size: x-small;">Typed or printed name</p> </div> </div> |                                     |      |      |      |      |  |                   |     |      |     |                           |      |                  |      |       |  |      |      |                    |      |  |      |        |      |                        |   |  |     |      |              |  |                |     |          |     |   |      |     |      |     |  |      |       |              |     |   |      |       |      |       |  |                    |     |        |     |                  |      |     |      |                    |  |      |     |      |     |                          |      |              |      |              |   |                 |          |          |          |                                  |      |       |      |     |                                    |      |       |      |     |                                   |      |     |      |     |                                       |      |     |      |     |  |      |     |      |     |  |      |    |      |    |                                     |      |     |      |     |   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |
| Name (Print/Type)  | Joseph M. Noto  | Registration No.  | 32,163         | Telephone  | (585) 263-1601  |                 |                |           |   |                  |      |      |        |  |                                     |      |      |      |      |  |                   |     |      |     |                           |      |                  |      |       |  |      |      |                    |      |  |      |        |      |                        |   |  |     |      |              |  |                |     |          |     |   |      |     |      |     |  |      |       |              |     |   |      |       |      |       |  |                    |     |        |     |                  |      |     |      |                    |  |      |     |      |     |                          |      |              |      |              |   |                 |          |          |          |                                  |      |       |      |     |                                    |      |       |      |     |                                   |      |     |      |     |                                       |      |     |      |     |  |      |     |      |     |  |      |    |      |    |                                     |      |     |      |     |   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |
| Signature  |    | (Attorney/Agent)  |                | Date   | 4/2/04          |                 |                |           |   |                  |      |      |        |  |                                     |      |      |      |      |  |                   |     |      |     |                           |      |                  |      |       |  |      |      |                    |      |  |      |        |      |                        |   |  |     |      |              |  |                |     |          |     |   |      |     |      |     |  |      |       |              |     |   |      |       |      |       |  |                    |     |        |     |                  |      |     |      |                    |  |      |     |      |     |                          |      |              |      |              |   |                 |          |          |          |                                  |      |       |      |     |                                    |      |       |      |     |                                   |      |     |      |     |                                       |      |     |      |     |  |      |     |      |     |  |      |    |      |    |                                     |      |     |      |     |   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |

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